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Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or	John First Name E	First Name
	passport).	Middle Name	Middle Name
	Bring your picture identification to your meeting	Campanaro Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	First Name	First Name
	years	Middle Name	Middle Name
	Include your married or maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>1</u> <u>3</u> <u>2</u> <u>3</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	✓ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
	duling business as names	Business name	Business name

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Del	otor 1 John E Campanaro		Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
		EIN _	EIN		
		EIN — — — — — —	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		282 Belden Avenue			
		Number Street	Number Street		
		_	<del>-</del>		
		Glendale Heights IL 60139			
		City State ZIP Code	City State ZIP Code		
		DuPage County	County		
		If your mailing address is different from	If Debtor 2's mailing address is different		
		the one above, fill it in here. Note that the	from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
		court will send any notices to you at this mailing address.			
		9			
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		Oite. 71D Oads	0't. 710 0 d.		
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Р	art 2: Tell the Court Abo	out Your Bankruptcy Case			
	Tell the Court Abo	out rour Bankrupicy Case			
7.	The chapter of the Bankruptcy Code you		Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.		
7.	The chapter of the	Check one: (For a brief description of each, see			
7.	The chapter of the Bankruptcy Code you are choosing to file	Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top			
7.	The chapter of the Bankruptcy Code you are choosing to file	Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top  Chapter 7  Chapter 11			
7.	The chapter of the Bankruptcy Code you are choosing to file	Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top  Chapter 7			

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Deb	otor 1 John E Campanaro		Case number (if known)				
8.	How you will pay the fee	cou pay	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.				
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).				
		By tha fee	equest that my fee be waived (You may requilew, a judge may, but is not required to, waiven 150% of the official poverty line that applie in installments). If you choose this option, you fee Waived (Official Form 103B) and file	e your s to yo ou mus	fee, and may do ur family size an st fill out the App	so only if your income is less d you are unable to pay the	
9.	Have you filed for	<b>☑</b> No					
	bankruptcy within the last 8 years?	☐ Yes	S.				
	•	District		When		Case number	
		District			MM / DD / YYYY		
		District		When			
10.	Are any bankruptcy cases pending or being filed by a spouse who is	✓ No	S.				
	not filing this case with you, or by a business	Debtor			Relationsh	ip to you	
	partner, or by an affiliate?	District		When	MM / DD / YYYY	Case number,if known	
		Debtor			Relationsh	ip to you	
		District				Case number,	
11.	Do you rent your residence?	✓ No.		dgmen	it against you an	d do you want to stay in your	
			<ul><li>No. Go to line 12.</li><li>☐ Yes. Fill out Initial Statement About and file it with this bankruptcy petitic</li></ul>		iction Judgment	Against You (Form 101A)	

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Deb	tor 1 John E Campanaro				Case	e number (if known)		
Pa	art 3: Report About Ar	ıy Bı	usine	sses You Own as	a Sole Proprieto	r		
12.	Are you a sole proprietor of any full- or part-time business?	<b>V</b>		Go to Part 4. Name and location of	business			
	A sole proprietorship is a business you operate as an			Name of business, if any				
	individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Number Street				
	If you have more than one sole proprietorship, use a			City		State	ZIP Co	ode
	separate sheet and attach it to this petition.			Health Care Bus Single Asset Re Stockbroker (as	e box to describe your siness (as defined in 1 al Estate (as defined i defined in 11 U.S.C. § ser (as defined in 11 U ve	1 U.S.C. § 101(27A)) in 11 U.S.C. § 101(51 § 101(53A))		
13.	Chapter 11 of the car Bankruptcy Code and mo are you a <i>small business</i> or i			filing under Chapter 11 opropriate deadlines. If nt balance sheet, state f these documents do r	you indicate that you ment of operations, ca	are a small business ash-flow statement, ar	debtor, you nd federal ir	nust attach your ncome tax return
	debtor?		No.	I am not filing under 0	Chapter 11.			
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code		a small business deb	otor accordin	ng to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	oter 11 and I am a sm	all business debtor a	ccording to	the definition in the
Pa	Report If You Ov	vn o	r Hav	e Any Hazardous	Property or Any	Property That N	eeds Imn	nediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention	n is needed, why is it n	needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number Street			
					City		State	ZIP Code
					,			

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Debtor 1 John E Campanaro Case number (if known)

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. You must check one:

☑ I received a briefing from an approved credit

About Debtor 1:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		John E Campanaro		Case number (if known)					
P	art 6:	Answer These Q	uesti	ons for Rep	orting Purp	os	es		
16.	What ki have?	nd of debts do you	16a.	as "incurred l			sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
				<ul> <li>Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</li> <li>No. Go to line 16c.</li> <li>Yes. Go to line 17.</li> </ul>					
			16c.	State the type	e of debts you o	owe	e that are not consumer or bus	siness	s debts.
17.	Are you Chapter	ı filing under r 7?		No. I am not	t filing under Ch	nap	ter 7. Go to line 18.		
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	$\overline{\mathbf{V}}$		trative expense		•	•	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do imate that you		1-49 50-99 100-199 200-999	[ [		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you e your assets to h?		\$0-\$50,000 \$50,001-\$100, \$100,001-\$500 \$500,001-\$1 m	0,000		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you e your liabilities to		\$0-\$50,000 \$50,001-\$100, \$100,001-\$500 \$500,001-\$1 m	0,000		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	John E Campanaro		Case number (if known)			
Part 7:	Sign Below					
or you		I have examined this petition, and I declare and correct.	under penalty of perjury that the information provided is true			
		•	m aware that I may proceed, if eligible, under Chapter 7, 11, 12, erstand the relief available under each chapter, and I choose to			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		S .	ncealing property, or obtaining money or property by fraud in ult in fines up to \$250,000, or imprisonment for up to 20 years, d 3571.			
		X /s/ John E Campanaro John E Campanaro, Debtor 1	X Signature of Debtor 2			
		Executed on <b>08/16/2017</b>	Executed on			

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1	John E Campanaro		Case number (if knowr	n)
represente	not represented by y, you do not need	I, the attorney for the debtor(s) named in this eligibility to proceed under Chapter 7, 11, 12 relief available under each chapter for which the debtor(s) the notice required by 11 U.S.C certify that I have no knowledge after an inquis incorrect.	, or 13 of title 11, United Stat the person is eligible. I also C. § 342(b) and, in a case in v	es Code, and have explained the certify that I have delivered to which § 707(b)(4)(D) applies,
		X /s/ Charles Wm. Dobra Signature of Attorney for Debtor	Date	08/16/2017 MM / DD / YYYY
		Charles Wm. Dobra Printed name Charles Wm. Dobra, Ltd. Firm Name 675 E. Irving Park Road Number Street Suite 100		
		Roselle City	IL State	- 60172 ZIP Code
		Contact phone (630) 893-2494	Email address <b>Justic</b>	e@DobraLawFirm.com
		<b>00647039</b> Bar number	IL State	-

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	ill in this inf	formation to i	identify your case	and this filing:		
				_		
ן ו	ebtor 1	John First Name	<b>E</b> Middle Name	Campanaro  Last Name		
	ebtor 2 Spouse, if filing)	Firet Name	Middle Name	Last Name		
"	spouse, ii iiiiig)	Tilstivanie	Middle Name	Lastivaine		
U	Inited States Ba	inkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
1 -	ase number f known)				_	if this is an ded filing
Of	fficial Form	106A/B				
_		/B: Propert	ty			12/15
the filia she	e asset in the cang together, bo	ategory where yoth are equally roon. On the top of	ou think it fits best. B esponsible for supplyi any additional pages,	st an asset only once. If an a e as complete and accurate a ng correct information. If mo write your name and case nu	s possible. If two married p re space is needed, attach a mber (if known). Answer evo	eople are separate ery question.
ŀ	Part 1: De	scribe Each	Residence, Buildir	ng, Land, or Other Real E	state You Own or Have	e an Interest In
1.	✓ No. Go	or have any legato to Part 2.	•	in any residence, building, la	nd, or similar property?	
2.		-	•	of your entries from Part 1, in ite that number here	_	\$0.00
F	Part 2: De	scribe Your \	Vehicles			
	-		•	n any vehicles, whether they a also report it on Schedule G: Ex	_	-
3.	Cars, vans, t	rucks, tractors,	sport utility vehicles, r	motorcycles		
	✓ No ☐ Yes					
4.	Examples: Bo			recreational vehicles, other v t, fishing vessels, snowmobiles		
5.		-	•	of your entries from Part 2, in ite that number here	_	\$0.00
		•	Personal and Hous		_	
				ny of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.	Examples: M	oods and furnis	chings furniture, linens, china,	kitchenware		
	□ No □ Yes. Des	scribe One o	ordinary lot of misc.	household goods and furn	ishings	\$200.00

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Deb	tor 1	John E Campanaro Case number (if known)	
7.	Electron Example		
	□ No ☑ Yes.	Describe One cell phone.	\$50.00
8.		oles of value s: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	✓ No ☐ Yes.	Describe	
9.		ent for sports and hobbies s: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	✓ No ☐ Yes.	Describe	
10.	•	s: Pistols, rifles, shotguns, ammunition, and related equipment	
	_	Describe	
11.	Clothes Example  □ No	s: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
40	✓ Yes.	Describe One ordinary lot of clothing suitable for adult male person.	\$300.00
12.	Jewelry Example	s: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver	,
	✓ No ☐ Yes.	Describe	
13.		n animals s: Dogs, cats, birds, horses	
		Describe	
14.	did not I	er personal and household items you did not already list, including any health aids you ist	
		Give specific mation	
15.		dollar value of all of your entries from Part 3, including any entries for pages you have I for Part 3. Write the number here	\$550.00
Pa	art 4:	Describe Your Financial Assets	
Do y	you own (	or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	s: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	□ No ✓ Yes.		\$20.00

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Deb	ebtor 1 John E Campanaro	Case number (if known)	
17.	, , ,	ancial accounts; certificates of deposit; shares in credit unions, milar institutions. If you have multiple accounts with the same	
	☐ No ☑ YesInstit	tution name:	
	17.1. Checking account: Che	ecking account with Chase Bank	\$100.00
18.	•	stocks nts with brokerage firms, money market accounts	
	✓ No ☐ Yes Institution or is:	suer name:	
19.	<ol> <li>Non-publicly traded stock and interests i an interest in an LLC, partnership, and jo</li> </ol>	in incorporated and unincorporated businesses, including pint venture	
	✓ No  ☐ Yes. Give specific information about them	r: % of ownership:	
20.	Government and corporate bonds and ot     Negotiable instruments include personal ch	ther negotiable and non-negotiable instruments necks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.	
	No     Yes. Give specific information about them Issuer name:		
21.	I. Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, profit-sharing plans	i, 401(k), 403(b), thrift savings accounts, or other pension or	
	<ul><li>✓ No</li><li>✓ Yes. List each account separately. Type of account:</li></ul>	: Institution name:	
22.	• •	e made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications	
	✓ No ☐ Yes	Institution name or individual:	
23.	✓ No	lic payment of money to you, either for life or for a number of years)	
24	Yes Issuer name ar	nd description:  ount in a qualified ABLE program, or under a qualified state tuition program.	
	26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b  ✓ No		
	<del></del>	ne and description. Separately file the records of any interests. 11 U.S.C. § 521(	c)
25.	<ol><li>Trusts, equitable or future interests in pr powers exercisable for your benefit</li></ol>	roperty (other than anything listed in line 1), and rights or	
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about them</li></ul>		
26.	•	ecrets, and other intellectual property; es, proceeds from royalties and licensing agreements	
	✓ No ☐ Yes. Give specific information about them		

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27. Licenses, franchises, and other general intangibles   Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses   No	Deb	tor 1	John E Campanaro	Case number (if known)	
No   Yes. Give specific   Information about them   Current value of the portion you own?   Do not deduct secured claims or exemptions.	27.	License	s, franchises, and other general intangibles		
Yes. Give specific information about them    Money or property owed to you?   Current value of the portion you own?			es: Building permits, exclusive licenses, cooperative association holdings, I	iquor licenses, professional licen	ses
Information about them   Current value of the portion you own?   Do not deduct secured claims or exemptions.			<b>.</b>		
Money or property owed to you?    Current value of the portion you own?   Con ret deduct secured claims or exemptions.    No					
Do not deduct secured claims or exemptions.  28. Tax refunds owed to you    No					
Do not deduct secured claims or exemptions.	Mon	ey or pr	operty owed to you?		
Claims or exemptions.					
No   Yes. Give specific information   State:   Local:					
No   Yes. Give specific information   State:   Local:					
ves. Give specific information about them, including whether you already filed the returns and the tax years	28.	Tax refu	inds owed to you		
ves. Give specific information about them, including whether you already filed the returns and the tax years		I√I No			
about them, including whether you already filed the returns and the tax years			Give specific information	Federal	·
### Support    Family support   Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement				_	
Pamily support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement    No				State:	
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement   No		and	the tax years	Local:	
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement   No	20	Family (	Namoré		
Yes. Give specific information	23.	Example		ance, divorce settlement, property	/ settlement
Maintenance: Support: Divorce settlement: Property settlement: Property settlement:  30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No Yes. Give specific information  31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value			Give specific information	Alimony	
Support:  Divorce settlement:  Property settlement:  Property settlement:  230. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No Yes. Give specific information  31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No Yes. Name the insurance company of each policy and list its value		П тез	. Give specific information	·	
Divorce settlement:  Property settlement:  30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No Yes. Give specific information  31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance company of each policy and list its value					
30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No Yes. Give specific information  11. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No Yes. Name the insurance company of each policy and list its value					
30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No Yes. Give specific information  11. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No Yes. Name the insurance company of each policy and list its value				Property settlemen	•
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No Yes. Give specific information  11. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value				r roperty settlement	
Yes. Give specific information	30.		es: Unpaid wages, disability insurance payments, disability benefits, sick pa		
Yes. Give specific information		<b>√</b> No			
31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No Yes. Name the insurance company of each policy and list its value			Give specific information		
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No  Yes. Name the insurance company of each policy and list its value	24	Interest	a in inquirance policies		
<ul> <li>No</li></ul>	31.			t. homeowner's, or renter's insura	nce
<ul> <li>Yes. Name the insurance company of each policy and list its value</li></ul>		•	,	,	
company of each policy and list its value		✓ Yes	Name the insurance		
32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died  ✓ No  ☐ Yes. Give specific information  33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue  ✓ No  ☐ Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  ✓ No					
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died  No Yes. Give specific information  33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue  No Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  No		and	list its value Company name: Bei	neficiary: Su	rrender or refund value:
Yes. Give specific information  33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment   Examples: Accidents, employment disputes, insurance claims, or rights to sue  No Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  No	32.	If you ar	e the beneficiary of a living trust, expect proceeds from a life insurance poli	cy, or are currently	
Yes. Give specific information  33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment   Examples: Accidents, employment disputes, insurance claims, or rights to sue  No Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  No		I <b>⊋</b> I No			
33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment   Examples: Accidents, employment disputes, insurance claims, or rights to sue  No Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  No			Give specific information		
Examples: Accidents, employment disputes, insurance claims, or rights to sue  ✓ No  ✓ Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  ✓ No		_			
Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  V No	33.			demand for payment	
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  ☑ No					
rights to set off claims  ☑ No		☐ Yes	Describe each claim		
☑ No	34.			aims of the debtor and	
		•	-		
☐ Yes. Describe each claim		_	Describe each claim		

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Deb	tor 1	John E Campanaro	Case number (if known)	
35.	Any fin	ancial assets you did not already list		
	✓ No	s. Give specific information		
36.		e dollar value of all of your entries from Part 4, including any entries for the defendance of all of your entries for the part 4. Write that number here		\$120.00
Pa	art 5:	Describe Any Business-Related Property You Own or Ha	ه ive an Interest In.  List any	real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-related p	roperty?	
		Go to Part 6. s. Go to line 38.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	nts receivable or commissions you already earned		
		s. Describe		
39.		equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, fax desks, chairs, electronic devices	machines, rugs, telephones,	
	✓ No ☐ Yes	s. Describe		
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of y	our trade	
	✓ No ☐ Yes	s. Describe		
41.	Invento	ry		
	✓ No ☐ Yes	s. Describe		
42.	Interes	ts in partnerships or joint ventures		
	✓ No	s. Describe Name of entity:	% of ownership:	
43.	Custon	ner lists, mailing lists, or other compilations		
	✓ No ☐ Yes	<ul> <li>Do your lists include personally identifiable information (as defined</li> <li>No</li> <li>Yes. Describe</li> </ul>	in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	s. Give specific information.		
45.		e dollar value of all of your entries from Part 5, including any entries for the part 5. Write that number here	or pages you have	\$0.00

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Deb	tor 1	John E Campanaro	Case number (if known)	
P		Describe Any Farm- and Commercial Fishing-Related Prop If you own or have an interest in farmland, list it in Part 1.	perty You Own or Have an Interest In.	
46.	Do you	own or have any legal or equitable interest in any farm- or commercial f	fishing-related property?	
		Go to Part 7. s. Go to line 47.		
			Current value of the portion you own?  Do not deduct secur claims or exemption	red
47.	Farm a Example	nimals les: Livestock, poultry, farm-raised fish		
	✓ No			
48.	Crops-	either growing or harvested		
		s. Give specific		
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trad	de	
	✓ No ☐ Yes	S		
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No	S		
51.	Any far	m- and commercial fishing-related property you did not already list		
		s. Give specific		
52.		e dollar value of all of your entries from Part 6, including any entries for per led for Part 6. Write that number here		.00
Pa	art 7:	Describe All Property You Own or Have an Interest in That	You Did Not List Above	
53.	-	have other property of any kind you did not already list?  es: Season tickets, country club membership		
	✓ No	s. Give specific information.		
54.	Add the	e dollar value of all of your entries from Part 7. Write that number here	<b> →</b> \$0.	.00

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Debtor 1	John E Campanaro	Case nu	umber (if known)		
Part 8:	List the Totals of Each Part of this Form				
55. Part 1	: Total real estate, line 2				\$0.00
56. Part 2	: Total vehicles, line 5	\$0.00			
57. Part 3	: Total personal and household items, line 15	\$550.00			
58. Part 4	: Total financial assets, line 36	\$120.00			
59. Part 5	: Total business-related property, line 45	\$0.00			
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00			
61. Part 7	: Total other property not listed, line 54	\$0.00			
62. Total	personal property. Add lines 56 through 61	\$670.00	Copy personal property total	+	\$670.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62				\$670.00

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Fill in this in	formation to i	dentify your	case:			
Debtor 1	John First Name	<b>E</b> Middle Name	Campana e Last Name	aro		
Debtor 2 (Spouse, if filing	Tiret Name	Middle Name	e Last Name			
			RN DISTRICT OF I	I I IN	IOIS	
Case number (if known)						Check if this is an amended filing
Official Forn	n 106C					
		ertv You Cl	aim as Exemp	ot		04/16
Using the propert space is needed, write your name a	y you listed on Sc fill out and attach and case number (	hedule A/B: Prope to this page as m if known).	erty (Official Form 100 nany copies of Part 2	6A/B) 2: Add	as your source, list the ditional Page as nece	responsible for supplying correct information. ne property that you claim as exempt. If more essary. On the top of any additional pages,
is to state a spec exempted up to receive certain b exemption of 100	cific dollar amour the amount of an enefits, and tax-6 0% of fair market	nt as exempt. All y applicable stat exempt retirement value under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe	clair cemp imite mpti	n the full fair market tionssuch as those d in dollar amount. on to a particular dol	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an llar amount and the value of the ole statutory amount.
Part 1: Id	entify the Pro	perty You Cla	im as Exempt			
✓ You are	f exemptions are e claiming state an e claiming federal	d federal nonban	kruptcy exemptions.		if your spouse is filing S.C. § 522(b)(3)	with you.
2. For any pro	perty you list on	Schedule A/B th	at you claim as exen	npt, f	ill in the information	below.
•	of the property a at lists this prope		Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:			\$200.00			735 ILCS 5/12-1001(b)
_	ot of misc. hous	sehold goods		$   \sqrt{} $	100% of fair market	
and furnishing Line from Schedu					value, up to any applicable statutory limit	
Brief description:			\$50.00			735 ILCS 5/12-1001(b)
One cell phone Line from Schedu				$\overline{\mathbf{Q}}$	100% of fair market value, up to any applicable statutory limit	
(Subject to a	ndjustment on 4/01	/19 and every 3 y		es fil	ed on or after the date 215 days before you t	

☐ Yes

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Debtor 1 John E Campanaro		Case number	r (if known)
Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:  One ordinary lot of clothing suitable for adult male person.  Line from Schedule A/B:	\$300.00	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief description: US Currency Line from Schedule A/B: 16	\$20.00	100% of fair market value, up to any	735 ILCS 5/12-1001(b)
		applicable statutory limit	
Brief description: Checking account with Chase Bank	\$100.00	100% of fair market	735 ILCS 5/12-1001(b)
Line from Schedule A/B:		value, up to any applicable statutory limit	

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Fill in this inf	ormation to id	entify your case	e:			
Debtor 1	John	E	Campanaro			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for	the: <b>NORTHERN</b> I	DISTRICT OF ILLINO	ıs		
Case number (if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	: Creditors \	Who Have Cla	aims Secured by	y Property		12/15
correct informatio On the top of any	on. If more space additional pages,	is needed, copy the	ied people are filing tog e Additional Page, fill it nd case number (if kno operty?	out, number the entr		
<u> </u>	ck this box and su in all of the inform		court with your other sch	nedules. You have not	hing else to report on th	is form.
Part 1: Lis	t All Secured	Claims				
claim, list the creditor has a	creditor separately particular claim, listible, list the claims	editor has more than r for each claim. If m st the other creditors s in alphabetical orde	nore than one in Part 2. As	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the secures the	e property that claim:			
Creditor's name						
Number Street						
City  Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this c	Debtor 2 only the debtors and a	Conting Unliquid Dispute Nature of li An agre Statutor Judgme	lated	is mortgage or secured nechanic's lien)		
Date debt was inc	•	Last 4 digits	s of account number			
Add the dollar val	-	in Column A on th	is page. Write	\$0.00		

Official Form 106D

all pages. Write that number here:

If this is the last page of your form, add the dollar value totals from

\$0.00

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Fill	in this info	ormation to ide	entify your c	ase:			
Deb	otor 1	John	E	Campanaro			
		First Name	Middle Name	Last Name			
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name			
			ha: NODTUED	N DISTRICT OF ILL INOIS			
		ikruptcy Court for ti	ne: <b>NORTHER</b>	IN DISTRICT OF ILLINOIS			
	e number nown)					Check if this is a amended filing	an
Offic	cial Form	106E/F					
Sch	edule E/	F: Creditors	Who Have	e Unsecured Claims			12/15
Do no If moi to this	ot include any re space is no s page. On th	y creditors with pa eeded, copy the P he top of any addi	artially secured art you need, fi tional pages, w	and on Schedule G: Executory Collicians that are listed in Schedule III it out, number the entries in the write your name and case number (secured Claims	D: Creditors Who Hoboxes on the left. At	old Claims Secur	ed by Property.
		ors have priority ι	ınsecured clair	ms against you?			
[	□ No. Go to ✓ Yes.						
s r	claim. For each show both price more space is	ch claim listed, iden ority and nonpriority	ntify what type of amounts. As m	creditor has more than one priority uf claim it is. If a claim has both priorinuch as possible, list the claims in al	ty and nonpriority amo	ounts, list that clair	•
,		other creditors in Pa	art 3.	ns, fill out the Continuation Page of I		-	or's name. If
(	(For an explan			ns, fill out the Continuation Page of I	Part 1. If more than o	ne creditor holds a	or's name. If a particular  Nonpriority
				-	Part 1. If more than o ruction booklet.  Total claim	ne creditor holds a  Priority  amount	or's name. If a particular  Nonpriority amount
2.1		ation of each type		e instructions for this form in the inst	Part 1. If more than o	ne creditor holds a	or's name. If a particular  Nonpriority
2.1 Inter	nal Revenue	e Services		e instructions for this form in the instructions for this form in the instructions.	Part 1. If more than o ruction booklet.  Total claim	ne creditor holds a  Priority  amount	or's name. If a particular  Nonpriority amount
2.1 Interiority Depa	nal Revenue v Creditor's Name artment of the er Street	e Services e Treasury	of claim, see the	e instructions for this form in the inst	Part 1. If more than o ruction booklet.  Total claim	ne creditor holds a  Priority  amount	or's name. If a particular  Nonpriority amount
2.1 Interiority Depa Number Cent	nal Revenue Creditor's Namertment of the Error Street Cralized Inso	e Services	of claim, see the	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	Part 1. If more than or ruction booklet.  Total claim  \$700.00	Priority amount \$700.00	or's name. If a particular  Nonpriority amount
2.1 Interiority Depa Numbe Cent P. O.	nal Revenue / Creditor's Name artment of the er Street ralized Inso	e Services ene Treasury	of claim, see the	Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim Contingent	Part 1. If more than or ruction booklet.  Total claim  \$700.00	Priority amount \$700.00	or's name. If a particular  Nonpriority amount
2.1 Interiority Depa Numbe Cent P. O.	nal Revenue Creditor's Namertment of the Error Street Cralized Inso	e Services e Treasury Ivency Operatio	of claim, see the	Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim Contingent	Part 1. If more than or ruction booklet.  Total claim  \$700.00	Priority amount \$700.00	or's name. If a particular  Nonpriority amount

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Debtor 1	John E Campanaro	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
	y creditors have nonpriority unsecured  No. You have nothing to report in this part  'es	I claims against you?  . Submit this form to the court with your other schedules.	
If a cre type o	editor has more than one nonpriority unse f claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed luded in Part 1. If more than one creditor holds a particular claim, list the oth unsecured claims, fill out the Continuation Page of Part 2.	•
			Total claim
4.1 BMAC		Last 4 digits of account number	\$1,500.00
	reditor's Name sevelt Road Street	When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated	
Debtor Debtor Debtor At leas Check Is the claim	-	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Personal loan	
Yes  4.2  Discount Nonpriority C Shindler Number	Tires/Synchrony/Cavalry reditor's Name & Joyce Street gonquin Road, Ste 180	Last 4 digits of account number 3 5 3 4  When was the debt incurred? 10/2013  As of the date you file, the claim is: Check all that apply.  Contingent	\$1,267.41
Debtor Debtor Debtor At leas Check	State ZIP Code red the debt? Check one. 1 only	<ul> <li>✓ Unliquidated</li> <li>Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>✓ Other. Specify</li> <li>Credit Card</li> </ul>	

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Debtor 1 John E Campanaro	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.3		\$22.87
Elmhurst Memorial Healthcare	Last 4 digits of account number 4 1 0 4	·
Nonpriority Creditor's Name 27535 Network Place	When was the debt incurred? 12/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☑ Unliquidated □ □ Disputed	
Chicago IL 60673-1258	— — — — — — — — — — — — — — — — — — —	
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify  Medical services	
Is the claim subject to offset?	Medical Services	
✓ No		
Yes		
4.4		£4 000 00
Elmhusrt Memorial	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name	When was the debt incurred?	
Elmhust Clinic Number Street	As of the date you file, the claim is: Check all that apply.	
Department 4585	_ ☐ Contingent	
	☑ Unliquidated	
Carol Stream IL 60122-4585	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  ☐ Debtor 1 only	Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Medical services	
Is the claim subject to offset?		
☑ No □ Yes		
4.5		\$675.00
Hummingbird Nonpriority Creditor's Name	Last 4 digits of account number2682	
Blue Trust	When was the debt incurred?	
Number Street P. O. Box 1754	As of the date you file, the claim is: Check all that apply.	
F. O. BOX 1734		
	Disputed	
Hayward WI 54843 City State ZIP Code	Type of NONERIORITY uncocured claim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Personal loan	
Is the claim subject to offset?		
<b>☑</b> No		
Yes		

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Debtor 1 John E Campanaro	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$500.00
North Star Finance	Last 4 digits of account number	
Nonpriority Creditor's Name P. O. Box 498	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☑ Unliquidated □ □ Disputed	
Hays MT 59527		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	☑ Other. Specify Personal loan	
Is the claim subject to offset?	reisoliai loali	
✓ No		
Yes		
4.7		£4.046.64
Sears Credit Cards/Citibank	Last 4 digits of account number 6 1 0 7	\$4,016.64
Nonpriority Creditor's Name	When was the debt incurred? 10/2013	
P. O. Box 6282 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Sioux Falls SD 57117-6282	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?  ☑ No		
Yes		
40		
4.8	Local Addinition of account mountain	\$5,000.00
Short Term Loan Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	
1227 N Glen Ellyn Road		
Number Street	As of the date you file, the claim is: Check all that apply.  ☐ ☐ Contingent	
	✓ Unliquidated	
Glendale Heights IL 60139	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only  Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Personal loan	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 John E Campanaro	Case number (if known)		
Part 2: Your NONPRIORITY Unsecured Claims Continuation Page			
After listing any entries on this page, number the previous page.	nem sequentially from the	Total claim \$1,500.00	
Walmart Nonpriority Creditor's Name Synchrony Bank Number Street Attn: Bankruptcy Dept P. O. Box 965060 Orlando FL 32896-5060	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed		
City  State  ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card		

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Debtor 1 John E	Campanaro	Case number (if known)
Part 3: List C	Others to Be Notified Abo	out a Debt That You Already Listed
For example, if a creditor in Parts debts that you li	a collection agency is trying to a lor 2, then list the collection	otified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. To collect from you for a debt you owe to someone else, list the original agency here. Similarly, if you have more than one creditor for any of the idditional creditors here. If you do not have additional parties to be notified for omit this page.
Sears/Citibank		On which entry in Part 1 or Part 2 did you list the original creditor?
Name Blitt & Gaines, PC		Line of (Check one):
Number Street 661 Glenn Avenue		Part 2: Creditors with Nonpriority Unsecured Claims
Wheeling City	IL 60090 State ZIP Code	Last 4 digits of account number 6 1 0 7
Sears/Citibank		On which entry in Part 1 or Part 2 did you list the original creditor?
Name Midland Funding, I	LLC	Line of (Check one):
Number Street P. O. Box 939069		Part 2: Creditors with Nonpriority Unsecured Claims
San Diego	CA 92193	— Last 4 digits of account number <u>6</u> <u>1</u> <u>0</u> <u>7</u>
City	State ZIP Code	<u> </u>

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Debtor 1	John E Campanaro	Case number (if known)	
Part 4:	Add the Amounts for Each Type of Unsecured Claim		

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$700.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>-</b>	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$700.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>-</b>	\$15,481.92
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$15,481.92

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Fill in this inf	ormation to iden			
Debtor 1	John First Name	E Middle Name	Campanaro Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	RICT OF ILLINOIS		
Case number (if known)				Check if this is an amended filing

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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				-	
Fill in this ir	nformation to	identify your case	:		
Debtor 1	John	E	Campanaro		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United States B	Bankruptcy Court fo	or the: NORTHERN D	DISTRICT OF ILLINOIS		
Case number					
(if known)				Check if this is an	
				amended filing	
Official Forr Schedule F	<u>։ Your</u> Cod	lebtors			12
needed, copy th	e Additional Page	e, fill it out, and numbe		rrect information. If more space is the left. Attach the Additional Page to this wn). Answer every question.	
1. Do you hav  ☑ No ☐ Yes	e any codebtors?	? (If you are filing a jo	int case, do not list either spous	e as a codebtor.)	
	•	•		? (Community property states and territories as, Washington, and Wisconsin.)	
☑ No. Go	o to line 3.				
Yes. D		ormer spouse, or legal e	equivalent live with you at the tim	ie?	
□ Ye					
3. In Column 1	1, list all of your o	codebtors. Do not incl	lude your spouse as a codebto	or if your spouse is filing with you. List the	

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this info	rmation to identi	fy your case:					
Debtor 1	John	E	Campan	aro			
200101	First Name	Middle Name	Last Name	<del></del>	Che	ck if this is:	
Debtor 2	First Name	Middle Name	Loot Nome		_	An amended filing	
(Spouse, if filing)			Last Name	LINOIC		A supplement showing postpetition	
	nkruptcy Court for the	NORTHERN	DISTRICT OF IL	LINOIS		chapter 13 income as of the following	
Case number (if known)				_		MM / DD / YYYY	
Official Form	106I					WIWI/DD/TTTT	
Schedule I: Y							12/15
responsible for sup include information about your spouse. your name and cas	plying correct inforn about your spouse.	nation. If you are If you are separ eded, attach a se Answer every c	e married and not rated and your spo eparate sheet to th	filing jointly ouse is not	/, and your s filing with yo	Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write	
Fill in your eminformation.	ployment						
If you have mor			Debtor 1			Debtor 2 or non-filing spouse	
job, attach a se with information	parato pago I	oyment status	✓ Employed Not employed	ed		<ul><li>☐ Employed</li><li>☐ Not employed</li></ul>	
additional empl	overs.		_			☐ Not employed	
Include part-tim		pation	Driver-part tim	ie			
or self-employe		oyer's name	Enterprise Lea	asing Com	pany		
Occupation may student or home applies.	, <u>-</u> 111b1	oyer's address	1050 N Lomba Number Street	ırd Road		Number Street	
			Lombord		60449.42		
			Lombard City	IL State	<b>60148-12</b> 3 Zip Code	City State Zip	Code
	How	long employed t	here? 3 Years	5	·		
				-	<del></del>		
Part 2: Give	Details About M	onthly Incom	е				
	ncome as of the date less you are separated		<b>n.</b> If you have noth	ning to report	t for any line,	write \$0 in the space. Include your	
	ng spouse have more e, attach a separate s		er, combine the info	ormation for	all employer	s for that person on the lines below.	lf
				For D	Debtor 1	For Debtor 2 or non-filing spouse	
	ross wages, salary, a			2.	\$1,222.82		
would be.	ons). If not paid month	ily, calculate what	tile monthly wage				
would be.	ons). If not paid month ist monthly overtime	•	t the monthly wage	3. +	\$0.00		

Official Form 106I Schedule I: Your Income page 1

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Debt	tor 1 John E Campanaro		Case num	nber (if knowi	n)	
			For Debtor 1	For Debto non-filing		
	Copy line 4 here	<b>4</b> .	\$1,222.82			
5.	List all payroll deductions:			,		
	5a. Tax, Medicare, and Social Security deductions	5a.	\$201.97			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$0.00			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions.	og.				
	Specify:	5h.	+\$0.00			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$201.97			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	. 7.	\$1,020.85			
8.	List all other income regularly received:					
	<ol> <li>Net income from rental property and from operating a business, profession, or farm</li> </ol>	8a.	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$1,100.00			
	8f. Other government assistance that you regularly receive		<del>- , , </del>			
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	— 8g.	\$0.00			
	8h. Other monthly income.	J				
	Specify:	8h.,	+ \$0.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	<del></del> . 9.	\$1,100.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,120.85	+	=	\$2,120.85
11.	State all other regular contributions to the expenses that you list in		ule J.			
	Include contributions from an unmarried partner, members of your house friends or relatives.			r roommates	, and other	r
	Do not include any amounts already included in lines 2-10 or amounts the	nat are	not available to pay e	xpenses liste	ed in Sche	dule J.
	Specify:				11. +	\$0.00
40				1		40.400.05
	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilities.				12.	\$2,120.85
	if it applies.	. 4L!- 1	2			Combined monthly income
13.	Do you expect an increase or decrease within the year after you file  No.  None.	tills to	91 111 f			
	_					
	Yes. Explain:					

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F	Fill in this inform	ation to identif	y your case:			Cho	ck if this i	io:	
	Debtor 1	John First Name	<b>E</b> Middle Name	Campa Last Nan			An amer	nded filing ement showing	nostnetition
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nan	ne			13 expenses as	
	United States Bankru	uptcy Court for the:	NORTHERN DI	STRICT OF	ILLINOIS		MM / DE	) / YYYY	_
	Case number (if known)						WIIWI / DE	,,,,,,,,,	
0	fficial Form 10	6J				J			
S	chedule J: Yo	ur Expenses	5						12/15
co na	as complete and ac rrect information. If me and case numbe Part 1: Descril	more space is nee	eded, attach anothe ver every question	er sheet to th					
1.	Is this a joint case								
2.	_ No	ebtor 2 live in a se	parate household? • Official Form 106J		for Separate Househ	nold of	Debtor 2		
	Do not list Debtor 1 Debtor 2.	1 and	Yes. Fill out this int for each dependent		Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state the de names.	pendents'							Yes No Yes
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes						
F	Part 2: Estima	ite Your Ongoir	ng Monthly Exp	enses					
to	timate your expense report expenses as a form and fill in the	of a date after the		-	-	-	-	•	
	clude expenses paid ch assistance and h		•	•				Your expens	es
4.			nses for your resid				4.	·	\$600.00
	If not included in I	line 4:							
	4a. Real estate ta	xes					48	a	
	4b. Property, hom	neowner's, or renter's	s insurance				41	o	
	4c. Home mainter	nance, repair, and u	pkeep expenses				40	c	
	4d Homeowner's	association or cond	dominium dues				4	4	

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Del	btor 1 John E Campanaro	Case number (if known)
		Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.
6.	Utilities:	
	6a. Electricity, heat, natural gas	6a.
	6b. Water, sewer, garbage collection	6b
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. <b>\$157.00</b>
	6d. Other. Specify:	6d.
7.	Food and housekeeping supplies	7. <b>\$250.00</b>
8.	Childcare and children's education costs	8.
9.	Clothing, laundry, and dry cleaning	9. <b>\$75.00</b>
10.	Personal care products and services	10. <b>\$40.00</b>
11.	Medical and dental expenses	11. <b>\$108.00</b>
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. <b>\$130.00</b>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.
14.	Charitable contributions and religious donations	14. <b>\$40.00</b>
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.	
	15a. Life insurance	15a. <b>\$37.00</b>
	15b. Health insurance	15b. <b>\$108.00</b>
	15c. Vehicle insurance	15c. <b>\$95.00</b>
	15d. Other insurance. Specify:	15d.
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	46 #50.00
17	Specify: IRS Installment or lease payments:	16. <b>\$50.00</b>
.,.	17a. Car payments for Vehicle Vehicle	17a. <b>\$130.00</b>
	17b. Car payments for Vehicle 2	17b.
	17c. Other. Specify: Cigarettes	- <del></del> -
	17d. Other. Specify:	
18	Your payments of alimony, maintenance, and support that you did not report as	18.
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	
19.	Other payments you make to support others who do not live with you.	
	Specify:	19.

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Deb	tor 1	John E Campanaro	Case number (if known)	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	Specify:	21. +	
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$1,970.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$1,970.00
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$2,120.85
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>–</b>	\$1,970.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$150.85
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	file this form?	
		cample, do you expect to finish paying for your car loan within the year or do you e ent to increase or decrease because of a modification to the terms of your mortga	. ,	
		No. Yes. Explain here: None.		

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				ourrorn rago or		
F	ill in this inf	ormation to	dentify your case			
D	ebtor 1	John	E	Campanaro		
		First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	_	
	-		- 45 - NORTHERN D	ISTRICT OF ILL INOIS		
		nkruptcy Court to	or the: NORTHERN D	ISTRICT OF ILLINOIS	_	
1 -	ase number known)				Check if	this is an
	· · · · · · · · · · · · · · · · · · ·	4000:			amende	a ming
	ficial Form					
Si	ımmary of	Your Ass	ets and Liabilit	ies and Certain St	atistical Information	12/15
					r, both are equally responsible fo	
			•	•	tion on this form. If you are filing check the box at the top of this p	
Р	art 1: Sui	mmarize Yοι	r Assets			
						Your assets
						Value of what you own
1.	Schedule A/B	: Property (Offici	al Form 106A/B)			
	1a. Copy line	55, Total real e	state, from Schedule A/	B		\$0.00
	41. 0 15	00 Tatalassa		I I A/D		\$670.00
	1b. Copy line	62, Total perso	nai property, from Sche	dule A/B		
	1c. Copy line	e 63, Total of all	property on Schedule A	/B		\$670.00
Р	art 2: Sui	mmarize Yοι	r Liabilities			
						Your liabilities
						Amount you owe
2.				Property (Official Form 106		\$0.00
	2a. Copy the	total you listed i	n Column A, Amount of	claim, at the bottom of the la	ast page of Part 1 of Schedule D	. <del></del>
3.				s (Official Form 106E/F)	chedule E/F	\$700.00
	ou. Copy the	total olalino noi	Trait i (priority arisece	ned claims) nom inte de or e	oriodalo E/i	
	3b. Copy the	total claims from	n Part 2 (nonpriority uns	secured claims) from line 6j c	of Schedule E/F	<b>\$15,481.92</b>
					Your total liabilities	\$16,181.92

### Part 3: Summarize Your Income and Expenses

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Deb	otor 1	John E Campanaro	Case number (if known)	
P	art 4:	Answer These Questions for Administrative and Statistic	cal Records	
6.	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?		
		No. You have nothing to report on this part of the form. Check this box and sures	abmit this form to the court with yo	ur other schedules.
7.	What	kind of debt do you have?		
		Your debts are primarily consumer debts. Consumer debts are those "incuramily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statis		a personal,
		<b>Your debts are not primarily consumer debts.</b> You have nothing to report on this form to the court with your other schedules.	n this part of the form. Check this	box and submit
В.	From Officia	\$1,529.20		
9.	Сору	the following special categories of claims from Part 4, line 6 of <i>Schedule</i>	E/F:	
			Total claim	
	From	Part 4 on Schedule E/F, copy the following:		
	9a. [	Domestic support obligations. (Copy line 6a.)	\$0.0	<u>0</u>
	9b. 7	Faxes and certain other debts you owe the government. (Copy line 6b.)	\$700.0	<u>0</u>
	9c. (	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.0	<u>0</u>
	9d. S	Student loans. (Copy line 6f.)	\$0.0	<u>0</u>
	9e (	Obligations arising out of a separation agreement or divorce that you did not re	port as \$0.0	0

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$700.00

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Fill in this inf	ormation to	identify your case	:		
Debtor 1	John	E	Campanaro		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS		
Case number (if known)				Check if this is an amended filing	
Official Form	106Dec				
	_	Individual Debt	or's Schedules	1	2/15
	7 Dout air i	marviadai Bobi	or o concurre		
	ın Below	to 20 years, or boun	18 U.S.C. §§ 152, 1341, 1519, a		
Did you pay	or agree to pay	someone who is NOT	an attorney to help you fill out	bankruptcy forms?	
<b>☑</b> No					
Yes. Na	ame of person _			Attach Bankruptcy Petition Preparer's Notice  Declaration, and Signature (Official Form 11)	
Under penalt true and corr		eclare that I have read	the summary and schedules f	iled with this declaration and that they are	
X /s/ John	E Campanaro		X		

Signature of Debtor 2

MM / DD / YYYY

Date

John E Campanaro, Debtor 1

MM / DD / YYYY

Date <u>08/16/2017</u>

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	ill in thin inf	armatian ta	identify years			
	ebtor 1	John First Name	identify your case  E  Middle Name	Campanaro  Last Name	-	
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	-	
		nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	-	
	ase number known)				Check if this is an amended filing	
_	ficial Form atement o		l Affairs for Ind	ividuals Filing for E	Bankruptcy	04/16
cor	rect information	n. If more space		separate sheet to this form.	both are equally responsible for supplying On the top of any additional pages, write	
P	art 1: Giv	e Details Ab	out Your Marital S	Status and Where You L	ived Before	
1.	What is your  ☐ Married ☑ Not marrie	<b>current marital</b> ed	status?			
2.	<b>☑</b> No	•		other than where you live now rears. Do not include where yo		
3.	Within the las	st 8 years, did y	ou ever live with a spo	ouse or legal equivalent in a	community property state or territory? ana, Nevada, New Mexico, Puerto Rico, Texas,	
	✓ No ☐ Yes. Mak	e sure you fill o	ut Schedule H: Your Co	debtors (Official Form 106H).		
Р	art 2: Ex	plain the Sou	irces of Your Inco	me		
4.	Fill in the total	amount of inco	me you received from a	m operating a business durir Il jobs and all businesses, incl you receive together, list it on	0.	?
	✓ No ☐ Yes. Fill i	n the details.				

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Deb	tor 1	John E C	campanaro	Case number (if known)	
Include unemp		receive any other income during this year or the two previous calendar years? income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; byment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; inbling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under 1.			
	List each	source a	nd the gross income from each source separately. Do not include	de income that you listed in line 4.	
	▼ No □ Yes.	Fill in the	e details.		
P	art 3:	List Ce	ertain Payments You Made Before You Filed for E	ankruptcy	
6.	Are eith	er Debtor	1's or Debtor 2's debts primarily consumer debts?		
	□ No.		<b>Debtor 1 nor Debtor 2 has primarily consumer debts.</b> Cons d by an individual primarily for a personal, family, or household		
		During t	he 90 days before you filed for bankruptcy, did you pay any cred	ditor a total of \$6,425* or more?	
		□ No.	Go to line 7.		
		☐ Yes.	List below each creditor to whom you paid a total of \$6,425* or total amount you paid that creditor. Do not include payments f child support and alimony. Also, do not include payments to a	or domestic support obligations, such as	
		* Subjec	ct to adjustment on 4/01/19 and every 3 years after that for case	s filed on or after the date of adjustment.	
	✓ Yes.	Debtor	1 or Debtor 2 or both have primarily consumer debts.		
		During t	he 90 days before you filed for bankruptcy, did you pay any cred	ditor a total of \$600 or more?	
		▼ No.	Go to line 7.		
		☐ Yes.	List below each creditor to whom you paid a total of \$600 or m creditor. Do not include payments for domestic support obliga Also, do not include payments to an attorney for this bankrupto	tions, such as child support and alimony.	
7.	Insiders corporati agent, in	include yo ons of whi cluding on	ore you filed for bankruptcy, did you make a payment on a dour relatives; any general partners; relatives of any general partners you are an officer, director, person in control, or owner of 20° are for a business you operate as a sole proprietor. 11 U.S.C. § 30 ort and alimony.	ers; partnerships of which you are a general partner; % or more of their voting securities; and any managing	
	<ul><li>✓ No</li><li>☐ Yes. List all payments to an insider.</li></ul>				

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Deb	tor 1	John E Campanaro	Case number (if known)
В.		I year before you filed for bankruptcy, did you make any payments or ed an insider?	transfer any property on account of a debt that
	Include	payments on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	List all payments that benefited an insider.	
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosur	es
9.	List all s	I year before you filed for bankruptcy, were you a party in any lawsuit such matters, including personal injury cases, small claims actions, divorce ations, and contract disputes.	·
	✓ No ☐ Yes	. Fill in the details.	
10.	seized,	I year before you filed for bankruptcy, was any of your property repos or levied? Ill that apply and fill in the details below.	sessed, foreclosed, garnished, attached,
		Go to line 11.  Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a k s from your accounts or refuse to make a payment because you owed	·
	✓ No ☐ Yes	. Fill in the details.	
12.		I year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	✓ No ☐ Yes		
Pa	art 5:	List Certain Gifts and Contributions	
13.	Within 2	2 years before you filed for bankruptcy, did you give any gifts with a to	otal value of more than \$600 per person?
	✓ No ☐ Yes	. Fill in the details for each gift.	
14.	Within 2 to any o	2 years before you filed for bankruptcy, did you give any gifts or contr :harity?	ibutions with a total value of more than \$600
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.	

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Debtor 1	John E Campana	aro	Case number (if k	nown)	
Part 6:	List Certain L	osses			
	n 1 year before you fi disaster, or gamblin		otcy or since you filed for bankruptcy, did you lose any	thing because of th	neft, fire,
✓ No	o es. Fill in the details.				
Part 7:	List Certain P	ayments or <sup>-</sup>	<b>Fransfers</b>		
anyor	ne you consulted abo	out seeking ban	otcy, did you or anyone else acting on your behalf pay kruptcy or preparing a bankruptcy petition? reparers, or credit counseling agencies for services require		
☑ Ye	o es. Fill in the details.				
Charles V Person Who	<b>Vm. Dobra, Esq.</b> Was Paid		Description and value of any property transferred Attorney's fees	Date payment or transfer was made	Amount of payment
	ng Park Road treet			04/10/2017	\$200.00
Suite 100					
Roselle City	IL State	<b>60172</b> ZIP Code			
Email or web	site address				
Person Who	Made the Payment, if Not	t You			
U S Bank Person Who	ruptcy Court Was Paid		Description and value of any property transferred Filing fee for Chapter 7 Bankruptcy	Date payment or transfer was made	Amount of payment
Number S	treet				\$330.00
City	State	ZIP Code			
Email or web	site address				
Person Who	Made the Payment, if Not	t You			
Springbo Person Who	ard Non-profit Cre Was Paid	dit Counselin	Description and value of any property transferred For credit counseling and debtor education courses	Date payment or transfer was made	Amount of payment
Number S	treet				\$110.00
City	State	ZIP Code			
Email or web	site address				
Person Who	Made the Payment, if Not	t You			

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Deb	tor 1 John E Campanaro		Case number (if k	nown)	
CIN Pers	on Who Was Paid	Description and value of any proper For copies of tax transcripts from	•	Date payment or transfer was made	Amount of payment
Num	per Street	_			\$35.00
		_			
City	State ZIP Code				
Ema	or website address	_			
Pers	on Who Made the Payment, if Not You	_			
17.	Within 1 year before you filed for bankru anyone who promised to help you deal				perty to
	Do not include any payment or transfer that		io to your oround		
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>				
18.	Within 2 years before you filed for bank property transferred in the ordinary cou			perty to anyone, ot	her than
	Include both outright transfers and transfe Do not include gifts and transfers that you	, , , , ,	security interest o	or mortgage on your	property).
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>				
19.	Within 10 years before you filed for ban you are a beneficiary? (These are ofte		to a self-settled tr	ust or similar devic	e of which
	✓ No ☐ Yes. Fill in the details.				
P	art 8: List Certain Financial Ac	counts, Instruments, Safe Depo	sit Boxes, and	Storage Units	
20.	Within 1 year before you filed for bankrubenefit, closed, sold, moved, or transfel		nstruments held i	n your name, or for	your
	Include checking, savings, money market, houses, pension funds, cooperatives, asset		f deposit; shares ir	n banks, credit union	s, brokerage
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>				
21.	Do you now have, or did you have within for securities, cash, or other valuables?		, any safe depos	it box or other depo	ository
	✓ No ☐ Yes. Fill in the details.				

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Deb	otor 1	John E Campanaro Ca	se number (if known)
22.	<b>☑</b> No	you stored property in a storage unit or place other than your home within a storage.  S. Fill in the details.	I year before you filed for bankruptcy?
P	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	u hold or control any property that someone else owns? Include any proped in trust for someone.	erty you borrowed from, are storing for,
	✓ No ☐ Yes	ss. Fill in the details.	
P	art 10:	Give Details About Environmental Information	
For	the purp	pose of Part 10, the following definitions apply:	
ı	hazardou	mental law means any federal, state, or local statute or regulation concern ous or toxic substance, wastes, or material into the air, land, soil, surface w g statutes or regulations controlling the cleanup of these substances, was	ater, groundwater, or other medium,
		ans any location, facility, or property as defined under any environmental l or used to own, operate, or utilize it, including disposal sites.	aw, whether you now own, operate, or
		ous material means anything an environmental law defines as a hazardous ce, hazardous material, pollutant, contaminant, or similar item.	waste, hazardous substance, toxic
Rep	ort all no	notices, releases, and proceedings that you know about, regardless of whe	n they occurred.
24.	Has any law?	ny governmental unit notified you that you may be liable or potentially liable	e under or in violation of an environmental
	✓ No ☐ Yes	ss. Fill in the details.	
25.	<b>☑</b> No	you notified any governmental unit of any release of hazardous material? s. Fill in the details.	
26.	Have you	you been a party in any judicial or administrative proceeding under any env i.	ironmental law? Include settlements and
	✓ No ☐ Yes	es. Fill in the details.	

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Deb	otor 1	John E Campanaro	Case number (if known)
Р	art 11:	Give Details About Your Busines	s or Connections to Any Business
27.	Within 4		d you own a business or have any of the following connections to any
		A sole proprietor or self-employed in a trade A member of a limited liability company (LL A partner in a partnership An officer, director, or managing executive An owner of at least 5% of the voting or equ	of a corporation
	-	None of the above applies. Go to Part 12.  Check all that apply above and fill in the de	etails below for each business.
28.		2 years before you filed for bankruptcy, did ncial institutions, creditors, or other parties	d you give a financial statement to anyone about your business? Include s.
	□ No □ Yes	s. Fill in the details below.	
Р	art 12:	Sign Below	
tha pro	t answers	s are true and correct. I understand that m	Affairs and any attachments, and I declare under penalty of perjury naking a false statement, concealing property, or obtaining money or e can result in fines up to \$250,000, or imprisonment for up to 20 years,
X	/s/ John	E Campanaro	<b>(</b>
•	John E C	ampanaro, Debtor 1	Signature of Debtor 2
	Date	08/16/2017	Date
Did	you atta	ch additional pages to Your Statement of I	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
	No Yes		
Did	you pay	or agree to pay someone who is not an at	torney to help you fill out bankruptcy forms?
	No		
	Yes. Na	me of person	Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:				
Debtor 1	John	E	Campanaro	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS				
Case number				
(if known)				

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

#### Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ John E Campanaro

John E Campanaro, Debtor 1

Date 08/16/2017 MM / DD / YYYY Х

Signature of Debtor 2

Date

MM / DD / YYYY

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: **John E Campanaro** CASE NO

CHAPTER 7

### **VERIFICATION OF CREDITOR MATRIX**

VE	RIFICATION OF CREDITOR MATRIX
The above named Debtor hereby was knowledge.	verifies that the attached list of creditors is true and correct to the best of his/her
Date 8/16/2017	Signature // John E Campanaro  John E Campanaro
Date	Signature

BMAC 17 W Roosevelt Road Lombard, IL 60148

Discount Tires/Synchrony/Cavalry Shindler & Joyce 1990 E Algonquin Road, Ste 180 Schaumburg, IL 60173

Elmhurst Memorial Healthcare 27535 Network Place Chicago, IL 60673-1258

Elmhusrt Memorial Elmhust Clinic Department 4585 Carol Stream, IL 60122-4585

Hummingbird Blue Trust P. O. Box 1754 Hayward, WI 54843

Internal Revenue Services
Department of the Treasury
Centralized Insolvency Operations
P. O. Box 7346
Philadelphia, PA 19101-7346

North Star Finance P. O. Box 498 Hays, MT 59527

Sears Credit Cards/Citibank P. O. Box 6282 Sioux Falls, SD 57117-6282

Sears/Citibank Midland Funding, LLC P. O. Box 939069 San Diego, CA 92193

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Sears/Citibank Blitt & Gaines, PC 661 Glenn Avenue Wheeling, IL 60090

Short Term Loan 1227 N Glen Ellyn Road Glendale Heights, IL 60139

Walmart
Synchrony Bank
Attn: Bankruptcy Dept
P. O. Box 965060
Orlando, FL 32896-5060